

Attorney's Dock t No. 2853

COMBINED DECLARATION AND POWER OF ATTORNEY

CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one)

		original design
(¢ [[chec]]	ck one, if applicable) national stage of PCT supplemental
]]	divisional continuation continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Suture Pledget Package

SPECIFICATION IDENTIFICATION

the specification of which:

(a) (b)	[x]	is attached hereto. was filed on <u>July 15. 2003</u> as [x] Serial No. 10/620,134. or [] Express Mail No, as Serial No. not yet known and was amended (if
(c)	[]	applicable). was described and claimed in PCT International Application Nofiled onand as amended under PCT Article 19 on(if any).

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations \$1.56(a).

FOREIGN PRIORITY CLAIM

[] I hereby claim foreign priority benefits under Title 35, U.S.C. §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any

foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

complete (d) or (e))

(d) [] no such applications have been filed.

(e) [] such applications have been filed as follows

EARLIEST FOREIGN APPLICATIONS(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY

APPLICATION NO.

DATE OF FILING (month, day, year)

PRIORITY CLAIMED UNDER 35 USC 119

[] YES [] NO

ALL FOREIGN APPLICATION(S). IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. \$120

[x] I hereby claim the benefit under Title 35, United States Code \$120 of any United States application(s) or PCT international application(s) designating the United States of America that are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in those prior application(s) in the manner provided by the first paragraph of 35 U.S.C. \$120, I acknowledge the duty to disclose material information as defined in 37 C.F.R. \$1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

Prior U.S. Application(s) or PCT International Application(s) Designating the U.S. For Benefit Under 35 U.S.C. §120.

U.S. APPLICATIONS

Serial No.

Filing Date

Status
(issued, pending
or abandoned)
now abandoned

60/396,942

July 17, 2002

PCT APPLICATIONS DESIGNATING THE U.S.

PCT Application No.

PCT filing date

U.S. Serial Nos. assigned (if any) Status (patented, pending, abandoned)

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

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Send Correspondence to

Direct Telephone Calls To: (Name and telephone number)

Mark Farber C/O United States Surgical Corporation, A division of Tyco Healthcare Group LP 150 Glover Avenue Norwalk, Connecticut 06856

Mark Farber (203) 845-1059

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIG	TAN	rr (S

Inventor's signature
Date / / VY 03 Country of Citizenship U.S.A.

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